



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY

**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

**RECEIVED**

By Carol Day at 4:23 pm, Apr 23, 2014

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN  
107984

PRINTER SN  
099.3586.817

DATE OF INSPECTION  
04/16/2014

LOCATION OF INSTRUMENT (STREET AND CITY)  
104 W School, Hamilton

TIME OF INSPECTION  
8:39 pm

**CHECKLIST:** Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

☒ SIMULATOR SOLUTION

☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Guth Laboratories

LOT # 13210

EXP. DATE 07/29/2015

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN SD3147 SIMULATOR EXP DATE 08/27/2014

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 → .099

TEST 2 → .099

TEST 3 → .098

☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

New instrument placement. Instrument functioning according to standards.

**INSPECTING OFFICER**

SIGNATURE

*Sgt. Kimberly A. Grebner*

PRINT NAME

Sgt. Kimberly A. Grebner

TYPE II PERMIT NUMBER/EXPIRATION DATE

220190 08/13/2014

TELEPHONE NUMBER

(816) 583-7311

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Boulevard  
Poplar Bluff, MO 63901

**GUTH LABORATORIES, INC.**

890 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

**CERTIFICATE OF ANALYSIS**

**Certified Alcohol Reference Solution for Simulator**

Random Samples of Lot Number 13210 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1216% (w/vol) ethyl alcohol. The expiration date for this lot number is July 29, 2015 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

***NIST Traceability:***

*Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.*

*All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.*

AS IV Serial no: 187984  
Version no: 532B

## TEST RECORD 00008

Temp Date Time 210L

VOID: NFI

12 04/16/14 20:44

Subject Name

Subject I.D.

Operator Name, I.D.

*Sgt Kimberly A. Heebner*  
Location #310

AS IV Serial no: 187984  
Version no: 532B

## TEST RECORD 00007

Temp Date Time 210L

Air Blank:

04/16/14 20:43 .000

Calibration Check:

29 04/16/14 20:43 .098

Subject Name

Subject I.D.

Operator Name, I.D.

*Sgt Kimberly A. Heebner*  
Location #310

AS IV Serial no: 187984  
Version no: 532B

## TEST RECORD 00006

Temp Date Time 210L

Air Blank:

04/16/14 20:42 .000

Calibration Check:

28 04/16/14 20:42 .099

Subject Name

Subject I.D.

Operator Name, I.D.

*Sgt Kimberly A. Heebner*  
Location #310

AS IV Serial no: 187984  
Version no: 532B

## TEST RECORD 00004

Temp Date Time 210L

Air Blank:

04/16/14 20:39 .000

Calibration Check:

27 04/16/14 20:39 .099

Subject Name

Subject I.D.

Operator Name, I.D.

*Sgt Kimberly A. Heebner*  
Location #310

State of Missouri  
DEPARTMENT OF HEALTHP E R M I T  
T Y P E I IKIMBERLY A GREBNER

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 08/13/2012Number 220190Expires 08/13/2014

MO 580-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)